

Work Order ID 88680

88680

July-30-12 10:25:17 AM

Page 1

Item ID: D4018-5

Accep

N900040100

Setup Start

NS1

Revision ID:

Item Name: Rib

Start Date: 30/07/2012 **Start Qty:** 4.00

4

Cust Item ID

Required Date: 13/08/2012 **Req'd Qty:** 4.00

* 4 *

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 12/07/30 Tooling

Date:

Run Start

NP1

QC:

Date: / / SPC (Y/N)

Date:

Ston

NP2

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
 Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other						

Work Order ID 88680

88680

July-30-12 10:25:17 AM

Page 2

Item ID: D4018-5

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Rib

Stop

NS2

Start Date: 30/07/2012 Start Qty: 4.00

4

Cust Item ID:

Required Date: 13/08/2012 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:		Stop	*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00							13/5/13 JJ RL (B-05) Y

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS																	
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>																
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																
Work Order Update <input type="checkbox"/>		Large Fab <input type="checkbox"/>		Composite <input type="checkbox"/>		Supplier <input type="checkbox"/>																	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector												
Doc/Data <input type="checkbox"/>																							
Equip/Tooling <input type="checkbox"/>																							
Operator <input type="checkbox"/>																							
Material <input type="checkbox"/>																							
Setup <input type="checkbox"/>																							
Other <input type="checkbox"/>																							
Process <input type="checkbox"/>																							
Supplier <input type="checkbox"/>																							
Training <input type="checkbox"/>																							
Unapproved <input type="checkbox"/>																							
FAULT CATEGORY																							
Landing Gear				General																			
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio								<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
																				<input type="checkbox"/> Other			

Picklist Print

July-30-12 10:25:20 AM

Page 1

Work Order ID: 88680

88680

Parent Item: D4018-5

D4018-5

Parent Item Name: Rib

Start Date: 30/07/2012

Required Date: 13/08/2012

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP RevA: new issue DD 09.11.26 verified by:EC IPP Rev:B as per dwg revA 10.03.15 verified by:EC IPP Rev:C as per dwg RevB DD 10.04.16 verified by:EC IPP Rev:D as per dwg revC DD 10.08.18 verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304TS0.500W.049	Purchased		No			100	f	1,049.099	0.5558	2.340211		**	

M304TS0 500W 049

Square Tubing

Location	Loc Qty	Loc Code
MAT018	644	
122413	644	
MAT034	405.0995823	
118460	0.00001534	
121328	2.059994	
121565	20.775743	
121808	382.26383	

13.5.2
M122938 → 21.069

NCR: Yes / No

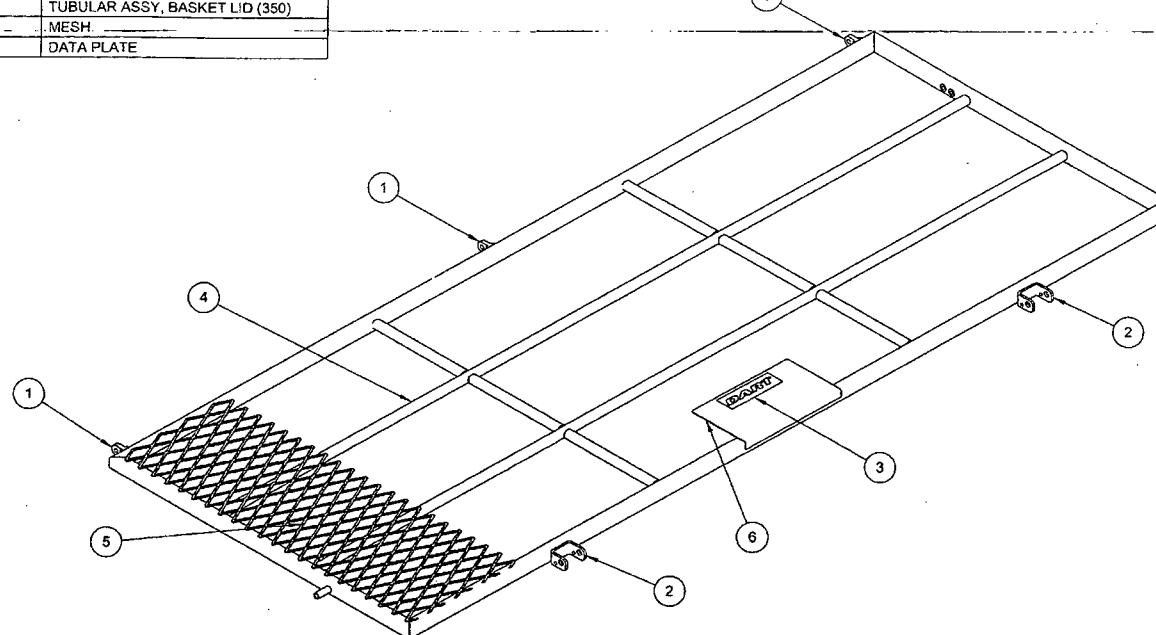
DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced			
				<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure			
				<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld			
				<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled			
				<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved				
				<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong				
				<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other			
				<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset					
				<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration					
				<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence					
				<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions					

ITEM	QTY	P/N	DESCRIPTION
X	1	D4018-041	SHORT BASKET LID ASSY (350)
1	3	D4016-3	HINGE HALF, LID
2	2	D2581	MOUNTING BRACKET
3	1	D2728-3	DART LOGO LABEL
4	1	D4018-101	TUBULAR ASSY, BASKET LID (350)
5	1	D4020-7	MESH
6	1	D4021-3	DATA PLATE



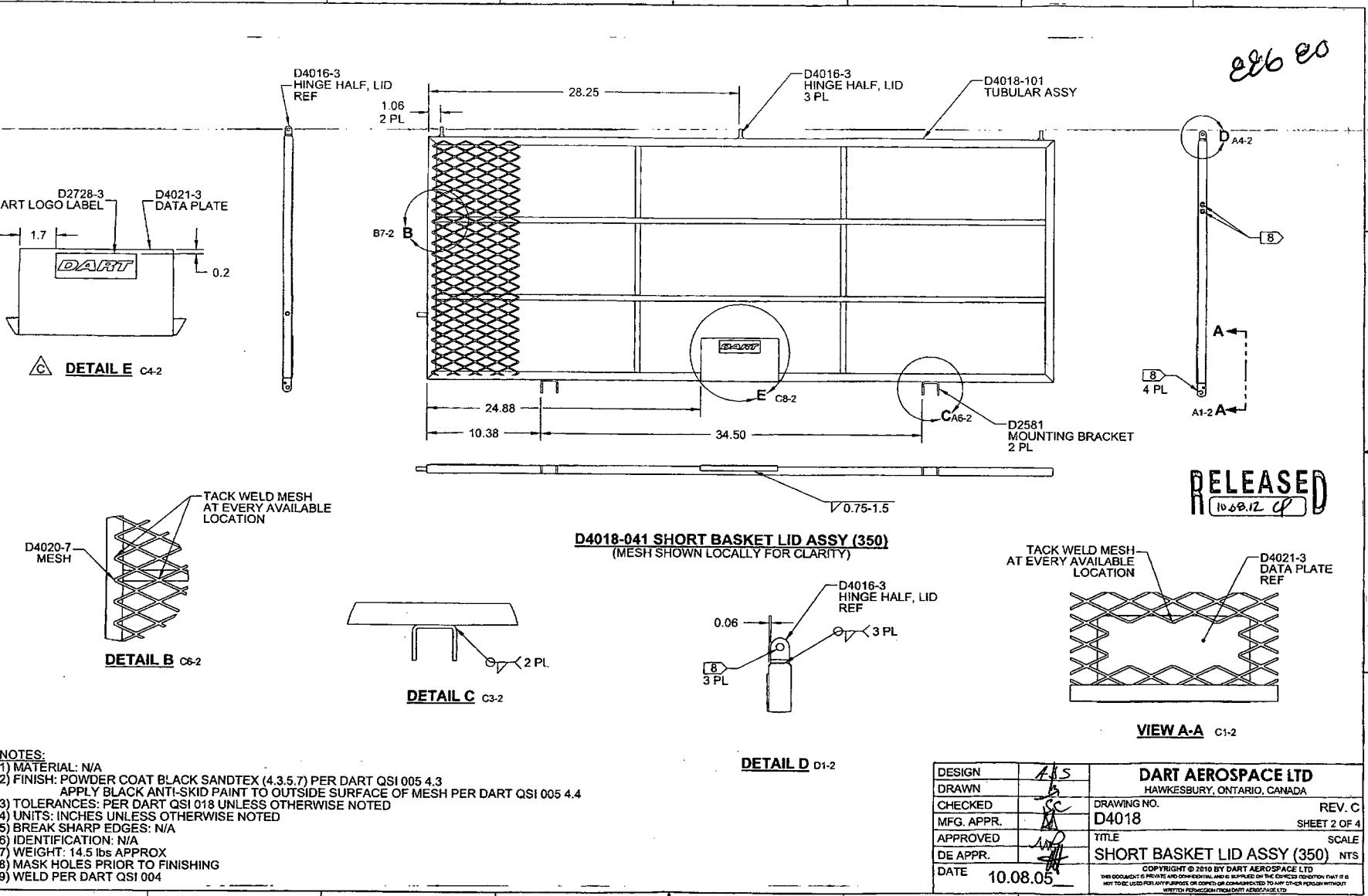
D4018-041 SHORT BASKET LID ASSY (350)
(MESH SHOWN LOCALLY FOR CLARITY)

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
88680 MLJ

12/07/00

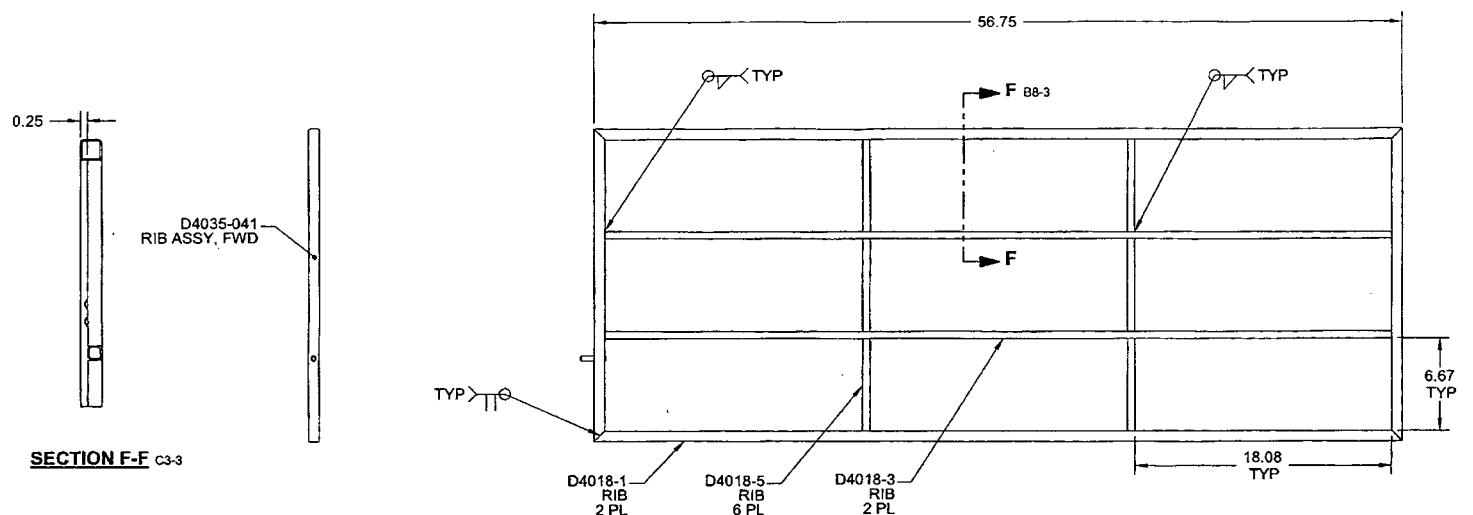
RELEASED
10.08.10
ECN 10-916

C	REMOVED D4086-232, UPDATED DETAIL E ACCORDINGLY (C8-2). REASON: NOW INSTALLED BY OPERATORS PER D350-607-2 REV. C AND D350-607-3 REV. A.	MB	10.08.05
B	BOM: INSERTED QTY 1 D2728-3 AS ITEM 3 & QTY 1 D4086-232 PLACARD AS ITEM 7. ITEMS RENUMBERED AS REQ. SHEET NOTES REVISED. DETAIL E REVISED. DETAIL F & G REVISED. (B4) FRONT VIEW ACCORDING. WELDING SYMBOLS REVISED. DETAIL VIEW E ADDED (C4-2)&(G82). SIDE VIEWS ADDED (C1-4)&(D1-4).	JPH	10.03.25
A	NEW ISSUE	JPH	10.03.04
REV.	DESCRIPTION	BY	DATE
	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA		
DESIGN	10.05		
DRAWN			
CHECKED	JKC	DRAWING NO.	REV. C
MFG. APPR.		D4018	SHEET 1 OF 4
APPROVED		TITLE	SCALE
DE APPR.		SHORT BASKET LID ASSY (350) NTS	
DATE	10.08.05	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



ITEM	QTY -101	P/N	DESCRIPTION
	X	D4018-101	TUBULAR ASSY, BASKET LID (350)
1	2	D4018-1	RIB
2	2	D4018-3	RIB
3	6	D4018-5	RIB
4	1	D4035-041	BASKET LID RIB ASSY, FWD
5	-1	D4035-043	BASKET-LID RIB ASSY, AFT

88680



SECTION F-F c3-3

8 D4018-101 TUBULAR ASSY, BASKET LID (350)

RELEASED
10.08.12 UP

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 9.06 lbs
- 8) TOLERANCE FOR XX.XX DIMENSIONS ± 0.06 FOR D4018-101
- 9) WELD PER DART QSI 004

DESIGN	AIS	DART AEROSPACE LTD	
DRAWN	A	HAWKESBURY, ONTARIO, CANADA	
CHECKED	SC	DRAWING NO.	REV. C
MFG. APPR.	MA	D4018	SHEET 3 OF 4
APPROVED	MM	TITLE	SCALE
DE APPR.	MM	SHORT BASKET LID ASSY (350)	NTS
DATE	10.08.05	COPYRIGHT © 2010 BY DART AEROSPACE LTD. THIS DOCUMENT CONTAINS TRADE SECRET INFORMATION OWNED BY DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISCLOSED IN WHOLE OR IN PART TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

28680

